Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

	,	CLAIMS AS	Golumn			ımn 2)		SMALL EN	NTITY □	OR	OTHER SMALL	
TC	TAL CLAIMS		7					RATE	FEE		RATE	FEE
FO	R		NUMBER I	ILED	NUME	BER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			7 minus 20=		*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	/ minus 3 =		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM PRESENT							:	+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, enter	"0" in d	column 2	1	TOTAL		OR	TOTAL	HO
CLAIMS AS AMENDED - PART II										OTHER	THAN	
	AMES A CONTRACTOR	(Column 1)		(Colur		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		J	+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)		ADDIT. FEE			ADDIT. FEET	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	↓ ľ	X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	ENDENT	CLAIM	<u> </u>	ا ا	+140=	·	OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	·	=]. [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- 01 411]=	.	X42=		OR	X84=	
<u> </u>	LINOI PHESE	NTATION OF M	ULTIPLE DEF	ENDENT	CLAIM		J ├	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								TOTAL			TOTAL	
***	If the "Highest Nu	mber Previously Panber Previously Panber Previously Pa	aid For" IN THI	S SPACE i	s less tha	an 3. enter "3."		ADDIT. FEE L	ropriate box		ADDIT. FEE	

EV 318425471 US

Date Deposited:

07/09/2003

PTO/SB/06 (08-00)
Approved for use through 10/31/2002. OMB 0651-0032
U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

			U. S. Pater	nt and 1 rad	emark Office; U.S			COMMERC
PATENT APPL	ICATION FEE DE	D Application or Docket Number 8403.891						
	CLAIMS AS FILED - (Column 1)	SMA	LL ENTITY	OR	OTHER T			
FOR	NUMBER FILED	NUMBER	NUMBER EXTRA		TE FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))		n Bi A			s <u>o</u>	OR		§ 750
TOTAL CLAIMS (37 CFR 1.16(c))	7 minu	s 20 = *	* 0		_= 0	OR	x \$ <u>18</u> =	0
INDEPENDENT CLAIMS (37 CFR 1.16(b))	1 min	us 3 = *	* 0		_= 0	OR	x <u>84</u> =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 0					0	OR	+ 280 =	0
If the difference in column 1 is I	тот	AL 0	OR	TOTAL	750			
(C	CLAIMS AS AME	SMA	LL ENTITY	OR	OTHER T			
REM A	LAIMS MAINING FTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	Minus	** 20	= 0	x \$_9=	_= 0	OR	x \$ <u>18</u> =	0
Independent * (37 CFR 1.16(b))	Minus	*** 3	= 0	x 42	_= 0 、	OR OR	x <u>84</u> =	0
` I	TION OF MULTIPLE DEP	PENDENT CLAIM (37 CFR 1.16(d))		+ 140	_= 0	OR	+ <u>280</u> =	0
(Column 1) (Column 2) (Column 3)					AL 0	OR	TOTAL DDIT. FEE	0
M REM	LAIMS MAINING FTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	Minus	**	=	x \$ <u>9</u>	= 0		x \$ <u>18</u> =	0
Independent *	Minus	***	= :	x 42	_= 0	OR OR	x <u>84</u> =	0
,	TION OF MULTIPLE DEF	E DEPENDENT CLAIM (37 CFR 1.16(d))			_= 0	OR	+ _280 =	0
(C	olumn I)	(Column 2)	(Column 3)	TO ADDIT.	TAL 0 FEE	ORA	TOTAL DDIT. FEE	0
REM A	LAIMS MAINING FTER ENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total *	Minus	** ,	=	x \$ <u>9</u>	_= 0	OR	x \$ <u>18</u> =	0
Independent * (37 CFR 1.16(b))	Minus	***	=	x 42	_ = 0	OR OR	x <u>84</u> =	0
· ·	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ 280 =	,0
	s less than the entry in colum			TC ADDIT.	TAL 0 FEE	OR	TOTAL DDIT. FEE	0 ,
** If the "Highest Number P *** If the "Highest Number P The "Highest Number Pre		S SPACE is less than 3	, enter "3".	in the appr	opriate box in col	umn 1.	-	

SEND TO: